*10/638399* (handwritten)

## CLAIMS AS FILED - PART I

|  | (Column 1) | (Column 2) |
|---|---|---|
| TOTAL CLAIMS |  |  |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | minus 20= |  |
| INDEPENDENT CLAIMS | minus 3 = |  |
| MULTIPLE DEPENDENT CLAIM PRESENT |  | ☐ |

| SMALL ENTITY TYPE ☐ | | OR | OTHER THAN SMALL ENTITY | |
|---|---|---|---|---|
| RATE | FEE |  | RATE | FEE |
| BASIC FEE | 7 (handwritten) | OR | BASIC FEE |  |
| X$ 25 = | 1 | OR | X$50= |  |
| X100= |  | OR | X200= |  |
| +180= |  | OR | +360= |  |
| TOTAL |  |  | TOTAL |  |

* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

625.0 (handwritten)

### AMENDMENT A

|  | (Column 1) CLAIMS REMAINING AFTER AMENDMENT |  | (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR | (Column 3) PRESENT EXTRA |
|---|---|---|---|---|
| Total | 17 | Minus | 20 | = |
| Independent | 17 | Minus | 3 | = 8 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |  |  |  |

| SMALL ENTITY | | OR | OTHER THAN SMALL ENTITY | |
|---|---|---|---|---|
| RATE | ADDITIONAL FEE |  | RATE | ADDITIONAL FEE |
| X$ 25 = |  | OR | X$50= |  |
| X100= |  | OR | X200= | 1,600 (handwritten) |
| +180= |  | OR | +360= |  |
| TOTAL ADDIT. FEE |  | OR | TOTAL ADDIT. FEE |  |

### AMENDMENT B

|  | (Column 1) CLAIMS REMAINING AFTER AMENDMENT |  | (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR | (Column 3) PRESENT EXTRA |
|---|---|---|---|---|
| Total |  | Minus |  | = |
| Independent |  | Minus |  | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |  |  | ☐ |

| RATE | ADDITIONAL FEE |  | RATE | ADDITIONAL FEE |
|---|---|---|---|---|
| X$ 25= |  | OR | X$50= |  |
| X100= |  | OR | X200= |  |
| +180= |  | OR | +360= |  |
| TOTAL ADDIT. FEE |  | OR | TOTAL ADDIT. FEE |  |

### AMENDMENT C

|  | (Column 1) CLAIMS REMAINING AFTER AMENDMENT |  | (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR | (Column 3) PRESENT EXTRA |
|---|---|---|---|---|
| Total |  | Minus |  | = |
| Independent |  | Minus |  | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |  |  | ☐ |

| RATE | ADDITIONAL FEE |  | RATE | ADDITIONAL FEE |
|---|---|---|---|---|
| X$ 25= |  | OR | X$50= |  |
| X100= |  | OR | X200= |  |
| +180= |  | OR | +360= |  |